

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT									
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	
1							51							
2							52							
3							53							
4							54							
5							55							
6							56							
7							57							
8							58							
9		8					59							
10	1						60							
11		1					61							
12		1					62							
13		1					63							
14	1						64							
15							65							
16		1					66							
17							67							
18		12					68							
19		4					69							
20	1						70							
21		1					71							
22		4					72							
23		12					73							
24							74							
25							75							
26							76							
27							77							
28							78							
29							79							
30							80							
31							81							
32							82							
33							83							
34							84							
35							85							
36							86							
37							87							
38							88							
39							89							
40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	4						TOTAL IND.							
TOTAL DEP.	54						TOTAL DEP.							
TOTAL CLAIMS	58						TOTAL CLAIMS							